PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								Application or Docket Number						
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			42					RATE		FEE	7	RATE	FEE	
FOR .			NUMBER FILED		NUMBER EXTRA			BASIC F	EE 3	85.00	OR	BASIC FEE	 	
TOTAL CHARGEABLE CLAIMS			42minus 20=		• 22			XS 9=			OR	XS18=	396	
INDEPENDENT CLAIMS			€ minus 3 =		• 3			X43=	1		OR	X86=		
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT	•				+145=	+		1	.000	258	
* If the difference in column 1 is less than zero, enter "0" in column 2									+		OR	+290=	1424	
CLAIMS AS AMENDED - PART II									· L	-	OR	TOTAL		
<u>/c</u>		(Column 1)	(Column 2) (Column 3)					SMALI	LEN	TITY	OR			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	TI	DDI- ONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 44	Minus	** 4	12.	= 2		X\$ 9=			OR	X\$18=	100	
AME	Independent	NTATION OF MI	Minus		CLAIM	= 2		X43=	1		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=			OR	+290=		
·									1		OR,	TOTAL ODIT. FEE	100	
_		(Column 1)		(Colum		(Column 3)	, î	DDIT. FE			, ,	WDII. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	TIC	DDI- DNAL EE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**			F	X\$ 9=			OR	X\$18=		
	Independent	NTATION OF MU	Minus	SENIOENT (CI AILA			X43=			OR	X86=		
	THO THESE		CHPLE DEF	ENDENT	CLAIM	·	L	+145=			OR	+290=		
								TOTAL DDIT, FEE			OR A	DOIT. FEE		
1		(Column 1)		(Colum		(Column 3)				·.	_			
MEN		REMAINING AFTER AMENDMENT		PREVIOU PAID FO	ER JSLY	PRESENT EXTRA		RATE	πο	DI- NAL EE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	Γ	X\$ 9=			OR	X\$18=		
		*	Minus	PEPENDENT CLAIM		-	┟	X43=			OR	X86=		
	ringi Presei	1	+145=			 								
• H	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										DR L	+290= TOTAL	· ·	
	the "Highest Nur	nber Previously Pai ber Previously Paid	d For IN THI	S SPACE is I	ece ther	3 anter "3"		TOTAL DIT. FEE	propri		_	DDIT. FEE L		

FORM PTO-875 (Rev. 10/03)
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